Black Hawk

FOR INSTRUCTIONS, SEE BACK OF FORM FORM DISCLOSURE SUMMARY PAGE DR-2 DISCLOSURE COMMITTEE NAME (Must be same as on Statement of Organization) (Rev. 07/2003) REPORT 2008 JAN Wieland DUNCI For Office Use Only 3 IMPORTANT: Indicate type of committee you are reporting for: Logged in (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates Scanned Computer AM CANDIDATE COMMITTEES ONLY: Audited Candidate Name Political Party Wieland Maus d Office Sought District (If Senate or House) Council 3/9-277-7169 SIGNATURE OF TREASURER (or person filing this report) Late filed reports are subject to possible civil and criminal penalties. SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A CERMARY REPORT FOR ANA (1) ELECTION /(2)NON-ELECTION EAR. (report date) Indicate one Local Committees, enter Date of Election CHECK IF AMENDMENT TO REPORT DATED County & Local Committees, enter County in Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. which Election is held (You must continue to file reports until a Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD 25.00 Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F)..... Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule Happlies to Candidates' Committees Only) 936 02 SUB-TOTAL\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD 667.26 Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report, balance must 268.16 be zero) (Attach DR-3)..... **UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)..... CANDIDATE COMMITTEES ONLY: CONSULTANT BREAKDOWN (Schedule G Attached?) NO VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

For	instructions.	See 1	Back of	Form

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SCHEDULE

(Rev. 07/03)

MONETARY

RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

(Including candidate's personal funds)			CK THIS BOX
COMMITTEE NAME (Must be same as on Statement of Organization) (1)			NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE REĈEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10 (30/01)	CK#3/45	Marty Herman 3133 Boulder Drive Cedar Falls, +A 50613		\$ 25.00	
	ID# CK#	CCALL			
	ID#				
	ID# CK#				
	ID# CK#				
	ID#				
		,	SUB-TOTAL	s d 5-0-0	· (

TOTAL (if last page of this schedule)

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^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS	SEE BACK (OF FORM
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5	1735		3,795	3
32		1377		
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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

	-IAMA EC			
DATE EXPENDED (MWDD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
0/30/07	ID#	Courier Communica 501 Commercial St Waterlow, IA 5078	news paper	
	CK#902	Water 100, IA 5071	insert.	\$82.56 84.10
	ID#	toads	election.	
1/6/67	CK# 908	ERRAY FOLL, IA ST	1613 appetizers	84.70
	ID#			
	CK#			
	ID#			
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·	CK#			
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	ID#			
	CK#			
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THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.6(3)(i).)

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(for Schedule B)

TOTAL (if last page of this schedule)